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PENNSYLVANIA STATE BOARD
of
Nursing Education and Licensure
Handbook
for
Schools of Nursing
in the
COMMONWEALTH of PENNSYLVANIA
Bulletin 634
1959

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DEPARTMENT OF PUBLIC INSTRUCTION
Harrisburg

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Bureau of Professional Licensing
Board of Nursing Education and Licensure
Harrisburg, Penna.

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Commonwealth of Pennsylvania

Department of Public Instruction

State Board of Nursing Education and Licensure

I. THE PENNSYLVANIA BOARD OF NURSING EDUCATION AND LICENSURE

A. Objectives of the Board

The State Board of Nursing Education and Licensure aims to assure safe nursing services for the citizens of the Commonwealth of Pennsylvania.

Embodied in this purpose is the responsibility to establish safe standards for the preparation of professional and practical nurses in approved educational programs, and to assure safe standards of nursing practice through examination and licensure of graduate professional and practical nurses, and through endorsement of professional and practical nurse educational records from other jurisdictions.

The Board subscribes to flexible and progressive methods of nursing education as indicated by the needs of the community and the advances in medical science.

Although the Board is charged specifically with establishing minimum curricular standards, it encourages and expects that approved nursing education programs in the Commonwealth will be constantly enriched to keep pace with changing needs.

B. Legal Authority

The licensing of professional nurses and the establishment of minimum standards for approved schools of nursing was authorized by act of Assembly in 1909.

According to provisions of the Administrative Code (Act of Assembly April 9, 1929; P.L. 177 as last amended by Act No. 70, approved May 22, 1951) the State Board of Nursing Education and Licensure is an administrative Board in the Department of Public Instruction.

The powers, duties, and functions of the Board are authorized according to the provisions of the Act of General Assembly as amended and approved June 1923, May 1927, May 1933, May 1937, April 1945, and May 1951.

Provision for the regulation of the licensing and practice of practical nursing, the imposing of duties on the State Board of Nursing Education and Licensure; and the imposing of penalties is authorized by the Act of the General Assembly No. 376 March 21, 1956.

I. THE PENNSYLVANIA BOARD OF NURSING EDUCATION AND LICENSURE

C. Powers, Duties, and Functions of the Board

The Board will administer the Nurse Practice Acts by establishing minimum curricular standards for professional and practical nursing schools, as well as by providing regulations for the conduct of these programs.

Annual educational surveys will be made of basic nursing programs offered in approved schools for the professional nurse, and practical nursing programs in approved practical nursing schools.

A classification of approved schools of professional nursing, practical nursing, and the cooperating agencies utilized by these schools for learning experiences shall be compiled each year.

It will provide for licensure of graduate professional nurses by examination and endorsement, and by the renewal of licenses.

It will provide for licensure of graduate practical nurses from approved schools of practical nursing by examination and endorsement, by waiver,* and by the renewal of licenses.

The Board shall suspend and revoke licenses for cause.

D. Licensing Examinations

The Pennsylvania State Board of Nursing Education and Licensure conducts licensing examinations at least once each year, and more often when necessary for both the professional and practical nurses. A list of examination dates is published annually.

The professional nursing licensing examination includes individual examinations in the five major areas: Medical Nursing, Surgical Nursing, Obstetric Nursing, Nursing of Children, and Psychiatric Nursing. The Basic Sciences, Fundamentals of Nursing, Pharmacology, Diet Therapy, and all other components of the curriculum are integrated throughout the five areas.

The practical nursing examination is made up of two examinations. Each examination includes all areas of the approved practical nursing curriculum.

Pennsylvania is a participating jurisdiction in the program of the State Board Test Pool Service of the National League for Nursing.

1. Passing Scores

Candidates for professional nursing licensure must achieve a minimum standard score of 350 in each of the five areas examined.

Candidates for practical nursing licensure must achieve a minimum score of 350.

*Until June 1, 1959

I. THE PENNSYLVANIA BOARD OF NURSING EDUCATION AND LICENSURE

D. Licensing Examinations (Con't)

2. Failing Scores

A standard score of less than 350 is regarded as a failing score, and the candidate is required to write a re-examination in the area or areas failed.

3. Re-Examinations

Board policy permits a candidate failing in one or more areas in the original examination to be admitted to two (2) re-examinations. Candidates will be notified of the scheduled date for re-examination. Each candidate for professional nursing licensure will be required to submit a fee of ten dollars (\$10.00) each time a re-examination is written in one or more areas. Each candidate for practical nursing licensure will be required to submit a fee of five dollars (\$5.00) each time a re-examination is written.

All requests for re-examination, with the fee, must be in the Board office at least eight weeks prior to the scheduled examination.

a. Third time failures, Professional Nursing Examination

Candidates for professional nursing licensure who fail one or more areas in the original examination and in the two subsequent re-examinations will be required to submit evidence that a course of study has been repeated in the area or areas failed for the third time.

The course or courses repeated must meet minimum requirements established by the Board.

The Board requires that the candidate obtain repeat courses in approved schools of nursing.

The Board recommends that, whenever possible, preparation for re-examination should include clinical experience in the area or areas failed the third time.

b. Third time failures, Practical Nursing Examination

Candidates for practical nursing licensure who have failed the testpool examination three times shall be required to repeat at least 100 hours of theory in an approved school of practical nursing.

c. Re-application

Any applicant failing to complete the licensing examination satisfactorily within five (5) years following receipt of initial notice of failure, shall have the application removed from the active files.

The applicant will be required to file a new application for admission including the established examination fee and new identification photographs. Candidates re-applying after a period of five years must satisfy curricular requirements current at the time of re-application.

I. THE PENNSYLVANIA BOARD OF NURSING EDUCATION AND LICENSURE

E. Approval of Schools of Nursing

Schools of Nursing in Pennsylvania are Approved:

- a. To safeguard the preparation of the professional and practical nursing student, and to assure safe standards of nursing practice in the Commonwealth.
- b. To guide prospective nursing students in the selection of approved schools which offer adequate resources for a sound basic nursing education program.
- c. To insure the graduate of professional and practical nursing schools of eligibility for admission to examination for licensure.
- d. To assist graduates of schools of nursing in Pennsylvania to qualify for licensure by endorsement in other jurisdictions.
- e. To stimulate and maintain continued growth and improvement of nursing education in the Commonwealth.

F. Annual Classification of Approved Schools

The State Board of Nursing Education and Licensure will place professional and practical nursing schools on the approved list providing they adopt and maintain minimum standards, and adhere to the policies and regulations of the Board, which are considered essential and basic to a sound program of nursing education.

Approval of Schools is granted for a period of one year. Approval is granted each year providing that the program continues to meet minimum standards and requirements.

G. Removal of a School from Approved List

A school may be removed from the approved list whenever it is shown that minimum requirements and standards are not in effect, or when there is evidence that graduates of the program are not prepared to practice professional and practical nursing.

In every instance, the Board will give sufficient opportunity to school officials for a hearing before the school is removed from the approved list.

A school of nursing which is placed on the provisionally approved list must show positive evidence that deficiencies are being corrected and improvements instituted.

A school with provisional approval which has not shown improvements sufficient to qualify for full approval at the end of one year, shall be removed from the approved list.

II. REGULATIONS FOR APPROVED PROGRAMS OR PROFESSIONAL NURSING EDUCATION*

A. Establishing an approved Program

A hospital or educational institution desiring to establish or re-establish a professional nursing education program is required to:

- a. Submit a written request to the Board.
- b. Submit clearly defined statements of objectives, the proposed curriculum and details of the faculty organization.
- c. Submit specific and pertinent information as requested by the Board concerning available resources.
- d. Assist the Board representative(s) during the required survey of school, hospital and teaching resources.

The Board will grant permission to establish or conduct the nursing education program only after careful and complete evaluation of all aspects of the program.

B. Standards for Hospitals Utilized in Nursing Education Programs

The effectiveness of a basic nursing education program will depend to a great extent upon the available clinical resources and the effective utilization of these resources in the education program.

The ideals and standards developed by the nursing student are influenced largely by what she observes in the clinical environment. Therefore, it is essential that the hospital maintain the highest standards of ethics and scientific practice.

Schools of nursing shall have arrangements to provide the professional nursing student with minimum acceptable clinical experience as follows:

- a. A total daily average patient census of not less than one hundred (100) patients (exclusive of Newborn).
- b. A daily average patient census of not less than:
 - Thirty (30) medical patients
 - Thirty (30) surgical patients
 - Fifteen (15) obstetrical patients
 - Fifteen (15) pediatric patients (exclusive of T & A)

The hospital shall be approved by the Joint Commission on Accreditation of Hospitals (or shall be eligible for such accreditation) and other accrediting agencies.

For regulations for Approved Schools of Practical Nursing, refer to Handbook for Schools of Practical Nursing in the Commonwealth of Pennsylvania, 1958.

II. REGULATIONS FOR APPROVED PROGRAMS OF PROFESSIONAL NURSING EDUCATION

B. Standards for Hospitals Utilized in Nursing Education Programs con't)

An institution conducting an approved program in nursing education may offer clinical resources to a school conducting a program for the practical nurse providing:

- a. That adequate clinical resources are assured to provide meaningful learning experiences for both groups.
- b. There is an adequate number of qualified instructors or supervisors assigned by the practical nursing school to efficiently administer the practical nursing program.
- c. That no assignment for students in the clinical areas interferes with the effectiveness of either the professional nursing program or the practical nursing program.

C. Admission Standards

The selection of qualified students for a school of nursing is the responsibility of the individual school. The standards set by each school should be guided by their established objectives.

1. Legal Requirements

The following requirements for admission to licensing examinations must be considered when each school establishes admission standards:

a. Educational Requirements

The minimum preprofessional education requirement for licensure as a professional nurse in Pennsylvania is "completion of work equal to a standard high school course as evaluated by the Credentials Evaluation Division, Department of Public Instruction." Upon this legal requirement, all approved schools should base the educational requirements for admission.

The completed record shall be forwarded to the Director, Credentials Evaluation Division, Department of Public Instruction, Harrisburg, Pennsylvania, for evaluation and issuance of a "Memorandum of Credit."

A memorandum of credit showing sixteen (16) Carnegie Units of Credit is required for admission to an approved school of nursing. An applicant who is unable to produce the required memorandum may be permitted to write the equivalency examinations provided by the Department of Public Instruction.

Upon receipt of the memorandum of credit, the applicant shall request a "Certificate of Preliminary Education" and pay the required fee of two dollars (\$2.00)

b. Age

The legal age requirement for admission to the licensing examination is 20 years of age or over.

II. REGULATIONS FOR APPROVED PROGRAMS OF PROFESSIONAL NURSING EDUCATION

C. Admission Standards (con't.)

2. Pre-entrance Testing

In order to assure admission of qualified students to the school of nursing, an organized program for selection is essential.

The Board requires that all psychological, personality, or interest inventories or tests utilized for the purpose of student selection be administered by a qualified psychometrist, or by an approved testing service.

3. Candidates with Advanced Credit

An applicant to a school of nursing who has advance credit for college or university work, may be granted a maximum of three (3) months credit in the basic nursing program for each year of certified college or university credit.

Granting of such credit shall be based upon the content of the college or university program as it relates to nursing, and upon the policies established by the school of nursing regarding the granting of credit.

Credit granted for advanced work must be determined by the School of Nursing and approved by the Board prior to admission of the applicant.

It is essential that a transcript of the advance work for which credit was granted be submitted on the application for licensing examinations. This evidence will be necessary in the event the applicant desires licensure by endorsement in another jurisdiction.

4. Health Qualifications

A complete physical examination shall be required before admission to the school of nursing.

School policy shall determine whether the examination will be administered by the school physician, or by a physician of the applicant's choice. In either case, a complete report of the results of examination shall be evaluated before admission.

The pre-entrance health examination shall include:

- a. Chest x-ray,
- b. Complete physical examination,
- c. Laboratory tests (blood count, hemoglobin, urinalysis and serology),
- d. Certificate of recent vaccination and
- e. Immunization against tetanus, typhoid, and poliomyelitis may be required before admission, or as part of the school health program.

5. Admission of Classes

The Board recommends that the admission of classes be kept to one class each year.

The number of candidates for each class should be determined by the educational and clinical resources which the school can provide.

A class shall be composed of not less than 15 qualified students.

D. Advisory Groups

It is recommended that an Advisory Group or Committee be available to the Director of Nursing and the Faculty to advise and support the Director and Faculty in promoting the program in

D. Advisory Groups (Con't)

nursing education.

E. Budget

It is recommended that the Director of the School of Nursing and the faculty ascertain the cost of the school of nursing each year.

This data should include the direct and indirect costs of the school of nursing as well as the direct and indirect income from the school of nursing which includes the monetary value of nursing student services.

F. Organization and Administration

Administration of the school of nursing is the responsibility of the Director of Nursing (or Director of the School, Dean or Chairman, etc.)

The Director is responsible to the administrative head of the hospital or educational institution for the program of the school of nursing. The Director must have authority delegated commensurate with the responsibilities entailed in administering the nursing program.

Where dual responsibilities are assigned, specific designation of the extent or scope of responsibility in each area is required.

Qualifications and functions should be clearly defined for all administrative and faculty personnel contributing to the program of nursing education.

The organization chart should clearly define the lines of authority and responsibility for all administrative and faculty personnel.

G. Faculty

1. The term "Faculty" as referred to hereinafter shall include:
 - a. Those licensed graduate professional nurses who have major responsibilities or assignments in teaching or educational supervision of nursing students.
 - b. Personnel from related disciplines who contribute to the nursing education program as instructors, lecturers, etc.
2. The following minimum required faculty is essential for approved schools of nursing to insure the development and implementation of a sound program of basic nursing education:
 - a. Director of Nursing (or Director of School, Dean, Chairman, etc.)
 - b. Educational Director (or Assistant Director of Nursing)
 - c. Instructors, Sciences (Physical and Social)
 - d. Instructor, Fundamentals of Nursing

G. Faculty(con't)

- e. Instructors of Clinical Nursing in each major area.

3. Recommended Additional Faculty are:

- a. Dietitian who meets requirements for membership in American Dietetics Association or equivalent preparation as approved by the Board.
- b. Additional instructors to insure a sound nursing program.
- c. Qualified librarian.
- d. Student Health Supervisor or Director.
- e. Recreation, Social Director or Counselor.

- 4. The Board recommends that the actual teaching hours should not exceed 16 hours per week. Laboratory and audited hours should be equated.

5. Centralized Teaching Programs

Schools of nursing may arrange agreements with a recognized college or university for teaching of basic sciences or other basic courses. All such agreements must be approved by the Board. A nurse coordinator should be employed for each program utilizing centralized teaching services.

H. Faculty Qualifications.

All full time teaching faculty members should have the recommended academic preparation as well as competency in their respective field.

1. Director of Nursing (Director of School, Dean, Chairman, etc.)

Requirements for appointment:

- a. Licensure in Pennsylvania
- b. Progressive nursing experience as a staff nurse, a head nurse, and supervisor.
- c. It is recommended that the Director of Nursing have educational and administrative experience in a school of Nursing.
- d. It is recommended that the Director of Nursing have a Master's Degree in Nursing Education or Education or an equivalent approved by the Board.

2. Educational Director or Assistant Director of Nursing

Requirements for appointment:

- a. Licensure in Pennsylvania

H. Faculty Qualifications (cont.)

- b. Progressive nursing experience as a staff nurse, a head nurse, and supervisor.
- c. Experience in education as an instructor, and supervision or administration in a nursing education program.
- d. Baccalaureate degree in Nursing Education or Board approved equivalent degree granted by a college or university offering a program of study in nursing education.

3. Instructors: Sciences, Fundamentals of Nursing, and Clinical Nursing

Requirements for appointment:

- a. Licensure in Pennsylvania
- b. Progressive nursing experience as a staff nurse, a head nurse, and supervisor (except for non-nurse)
- c. Experience in education as an instructor and in curriculum development.
- d. Baccalaureate Degree in Nursing Education or equivalent academic preparation as approved by the Board.

Members of the faculty who do not meet the minimum requirements for appointment must continue professional and academic preparation. It is required that a minimum of four (4) semester hours of credit be taken during each year until qualification is completed.

Qualification records of faculty appointees including official transcripts of college or university credits must be obtained by the school of nursing, and submitted to the Board for review and approval, preferably before appointment.

I. Faculty Responsibility

The faculty shall consider as its specific concern:

- a. The development and implementation of the total curriculum.
- b. The organization of the faculty with adequate committee structure to insure an effective and sound educational program.
- c. Recommendations for admission, promotion, and graduation of students based upon evaluation, counseling, and performance records.
- d. Assistance with school activities, public relations, budget, recruitment of students, and other activities which assure satisfactory operation of the school of nursing.
- e. Continued evaluation and improvement of the educational program.

III. CURRICULUM

A. Required Minimum Theory and Clinical Practice

		<u>MINIMUM REQUIRED</u>	
		<u>HOURS</u>	<u>WEEKS</u>
1. Biology and Physical Sciences.....		180	
a. Anatomy and Physiology.....	90		
b. Chemistry.....	45		
c. Microbiology.....	45		
<u>or</u>			
d. Integrated Science Course (1)	180		
2. Social Science.....		60	
a. Psychology.....	30		
b. Sociology and Social Problems.....	30		
3. Nursing History and Ethics.....		45	
a. Professional Adjustments and Ethics I.....	15		
b. Professional Adjustments and History of Nursing.....	30		
4. Medical and Surgical Nursing Care of Patients.....		235	
a. Respiratory Conditions.....			
b. Cardiovascular Conditions.....	:		
c. Gastro-Intestinal Conditions.....	:		
d. Urinary and Reproductive Conditions.....	:		
e. Integumentary Diseases.....	: **	235	
f. Endocrinologic and Metabolic Diseases.....	:		
g. Neurological Conditions.....	:		
h. Orthopedic Conditions.....	:		
i. Eye and ear Diseases.....	:		
j. Operative Aseptic Technique.....		15	6*
k. Communicable Disease (2).....		15	
l. Medical Nursing Experience.....			24
m. Surgical Nursing Experience.....			24
5. Obstetric Nursing.....		60	12
6. Medical Sciences.....		50	
a. Principles of Drugs and Solutions.....	20		
b. Pharmacology.....	30		
7. Fundamentals of Nursing (3).....		120	
8. Nutrition.....		30	
9. Diet Therapy (4).....		30	4*

*or equivalent as approved by the Board

**unit hours may vary as necessary to insure a well
balanced program in medical - surgical nursing.

III. CURRICULUM

A. Required Minimum Theory and Clinical Practice (con't)

	<u>HOURS</u>	<u>WEEKS</u>
10. Nursing of Children.....	60	12
11. Psychiatric Nursing.....	60	12
12. Vacations.....		12
13. Electives.....		26
Total.....		156

- (1) Course outlines must show detailed record of correlation and integration.
- (2) Communicable Diseases may be correlated and presented with appropriate medical, and surgical and pediatric nursing units.
- (3) Fundamentals of Nursing including: First Aid and Bandaging, Physical Therapy and Massage, and introduction to Nursing Fundamentals. When indicated, Drugs and Solutions may be included for a total of 140 hours.
- (4) Diet Therapy may be correlated and presented with appropriate medical and surgical nursing units.

The Board recommends that elective courses be included in the areas of "Dynamics of Human Behavior, Interpersonal Relationships, Communication Skills, and other courses indicated to provide the student with opportunities for personal and professional growth.

It is essential that a definite plan be prepared for the entire program (formal and clinical instruction and clinical experience) and for each class entering the school of nursing. The plans should be prepared in advance, and should be adjusted only as indicated by progressive changes in the educational program.

Experimentation in curriculum improvement is encouraged. Ten copies of proposed changes and plans must be submitted for review and approval by the Board.

Students must complete the prescribed course of the school of nursing, and may not be retained beyond the stated time for disciplinary measures, or for repetition of courses, etc., except as specifically approved by the Board.

III. CURRICULUM

B. Clinical Learning Experiences.

1. Clinical Resources

In order that classroom instruction may be adequately correlated with clinical experience, it is necessary that qualified supervision be provided in those areas to which nursing students are assigned for clinical learning experiences. When adequate supervision is not available, students may not be assigned to those areas.

The adequacy of clinical resources for nursing student assignments is based upon:

- a. The daily average patient census in the area.
- b. The variety of patient care available in the area.
- c. The number of nursing students, graduate nursing staff, and other nursing personnel assigned to the experience area.

The Board accepts as minimum, a ratio of one instructor or clinical supervisor to fifteen (15) students in the clinical area.

Adequate equipment, in good repair shall be available in all clinical areas to assure safe, aesthetic nursing care. Established policies and procedures should be well known and readily available to assure safe and complete patient care.

2. Clinical Instruction

A well developed and correlated plan of patient centered instruction shall be included in all clinical areas of the curriculum. An outline of this plan shall be available. All clinical instruction is an integral part of the total curriculum.

3. Hours and Tours of Clinical Experience

The hours of clinical practice for nursing students must not exceed forty (40) hours per week. This includes class hours, and applies to day, evening, and night assignments. Students may not be utilized to meet nursing service needs nor employed for hire as graduate nurses.

Evening assignments must not be given until completion of the first year of the program. Evening and night assignments may not exceed six (6) weeks night assignments, and ten (10) weeks of evening assignments in the second and third years of the program. Records to show these assignments must be available.

Evening and night learning experiences should appear on the Master Rotation plan and give evidence that well planned and comparable learning experiences may be assured for each student in the program.

C. Major Areas of Clinical Experience

It is recommended that theoretical instruction and clinical instruction be concurrent with supervised clinical experience in all areas.

Course outlines should be available to all who participate in the program. These should include the plan for clinical instruction and should coincide with the Master Rotation plan for clinical learning experience.

Where courses are integrated, course outlines must clearly state the areas of integration, and show evidence of equivalent minimum requirements.

When clinical areas are not segregated, student records must show that minimum required experience has been provided.

1. Medical-Surgical Nursing Learning Experiences

The Medical Nursing Learning experience should be planned to include opportunities for care of representative types of medical patients. Wherever possible, the medical specialties should include - tuberculosis nursing, neurological nursing, and communicable disease nursing, unless such clinical experiences are provided in an elective assignment or by a cooperating agency.

Students should not be assigned to isolation wards or units before they have an adequate understanding of the fundamentals of medical aseptic technique. They shall be supervised in these assignments at all times.

The Surgical Nursing learning experiences shall include opportunities in the nursing care of general surgical patients, as well as the care of patients with gynecological, genito-urinary, orthopedic, eye, ear, nose and throat conditions.

2. Operating Room Nursing Experience

This clinical experience shall be planned for a minimum of forty-two (42) days. During the experience the student shall participate in a minimum of ten (10) surgical operations.. Participation shall be interpreted as orientation to the clinical unit and understanding of surgical asepsis, and shall include:

- a. Nursing care of the patient awaiting surgery.
- b. Preparation of the operating room and sterile equipment for surgical operations.
- c. Participation as a scrub nurse, sponge, or suture nurse for a minimum of ten (10) surgical operations.

With approval of the Board, schools of nursing presenting integrated courses may utilize the following in lieu of the above experience:

- a. Assignment to well planned and supervised learning experiences in which the student follows a minimum of five (5) patients through pre-operative nursing care, observation or assisting with the surgical procedure, and post-operative nursing care.

b. If this plan is used, the operating experience is incorporated in surgical nursing (except the two (2) week orientation period in the operating room). Where a recovery room is available, two (2) of the six weeks may be spent in this area for learning experiences.

NURSING STUDENTS ASSIGNED TO THE OPERATING ROOM MAY NOT BE RECALLED FOR EMERGENCY PROCEDURES BEYOND THE REGULARLY ASSIGNED HOURS FOR THE OPERATING ROOM ASSIGNMENT.

III. CURRICULUM

C. Major Areas of Clinical Experience (con't)

3. Diet Therapy Experience

Any clinical dietary experience must be supervised by a qualified dietitian. Faculty consideration should be given to the incorporation of diet therapy in all clinical experiences. These experience should be patient-centered.

A representative number and variety of therapeutic diets should be available for the number of students assigned to this experience.

4. Obstetric Nursing

The maternity nursing experience must be provided in a segregated unit or department. This experience must include well planned and supervised learning experiences in the nursing care of at least five (5) women in Antepartum, Intrapartum, and Postpartum phases of maternity.

This clinical experience shall also include well planned and supervised learning experiences in the nursing care of new born and premature infants.

Whenever possible the nursing student should have opportunity to observe and participate in antepartum and postpartum clinics.

STUDENTS OF NURSING ASSIGNED TO THE DELIVERY ROOM FOR LEARNING EXPERIENCES MAY NOT BE RECALLED FOR SERVICE BEYOND THE SCHEDULED HOURS OF THE EXPERIENCE ASSIGNMENT.

5. Nursing of Children

This experience should be carefully planned to include opportunities for the care of infants and children through adolescence.

Experience must be provided in a segregated unit with a minimum daily average patient census of fifteen (15) (exclusive of T&A) including medical and surgical.

The student must have opportunity to participate in preparation of infant formula and diets. This experience may be integrated with pediatric clinical assignments, but a plan must be available to show integration.

It is recommended that whenever possible, the nursing student should have opportunity for observation or experience in the care of the well child. This experience may be provided in well baby clinics or nursery schools. All such experiences must be approved by the Board after review.

6. Psychiatric Nursing Experiences

This experience must be provided in an approved (by The American Psychiatric Association) unit or department providing sufficient opportunity for the care of psychiatric patients, both men and women. The student should have opportunity to participate in the care of patients in admission, prolonged treatment, active, convalescent, and special therapy units.

7. Outpatient Clinical Experience

Nursing students may be assigned to the outpatient Department for learning experiences when a sound program is available for clinical experience in selected outpatient clinics. It is recommended that this ex-

III. CURRICULUM

C. Major Areas of Clinical Experiences (con't)

7. perience and its content be planned and supervised by the school of nursing faculty.

It is recommended that learning experiences in the Out-patient Department be correlated with learning experiences in the other clinical areas.

D. Clinical Experiences Provided by Cooperation Agencies

All such experiences in the basic program must be approved by the Board before arrangements are completed. A survey of the clinical resources is required before Board approval is given. When learning experiences have been arranged, a formal written agreement shall be available. The Board recommends that three (3) copies be prepared; one (1) copy kept on file in the Home School, one (1) copy on file in the office of the Board in Harrisburg. This is the responsibility of the cooperating agency.

Agreements with cooperating agencies shall be reviewed and renewed on an annual basis, and should be mutually agreed upon in all aspects by the cooperating agencies and the school of nursing.

IV. SCHOOL FACILITIES AND STUDENT SERVICES

A. Teaching facilities

The Board accepts as minimum for efficient instruction in an approved school of nursing:

- a. A sufficient number of classrooms, laboratories and clinical conference rooms in proportion to the size of the student body.
- b. A Fundamentals of Nursing laboratory, adequately equipped to insure meaningful practice and application.
- c. Science laboratory facilities with adequate equipment and supplies, for those schools not utilizing cooperating agencies for basic sciences.

These rooms should be appropriately furnished, heated and ventilated. All laboratory equipment must be in satisfactory working order. It is recommended that adequate visual aids be available to the instruction staff.

It is also recommended that secretarial assistance be provided so that the faculty of the school may be relieved of duties of record-keeping and secretarial work.

B. School of Nursing Records

The school of nursing is responsible for instituting, maintaining, and safeguarding an adequate system of records for each student enrolled in the school. Records must be kept in locked, fire-resistant filing units.

Records must be made available to the Board Consultant during the annual survey.

Current records should include evidence of the student's performance in both theoretical and clinical performance.

Forms for records shall be those approved by the Board or those recommended by the National League for Nursing and approved by the Board.

The school of nursing is required to keep the Permanent Record Form for all students graduated from the school of nursing for the life time of each graduate. The Board recommends that the Student Health Record be kept for a period of five (5) years after graduation. This will provide a proof of health status for the hospital and school of nursing. The controlling institution must accept responsibility for the maintenance of all records when a school is closed.

The signatures of the Director of Nursing and the Educational Director are required on the Permanent Record Form in the spaces provided.

The diploma date is the date upon which the student completes the final day of the prescribed program. The date of formal graduation or commencement should not be used on any record form.

IV. SCHOOL FACILITIES AND STUDENT SERVICES

C. Library

A reference library offering an up-to-date selection of reference books, and periodicals as well as bound volumes of professional magazines, should be readily accessible to the nursing students and faculty.

Adequate chair and table space must be provided, preferably on the basis of one to every five (5) students.

It is recommended that the NLN handbook be used as a guide in developing the school of nursing library, and that provisions be made for continued development of library holdings.

D. Housing

It is essential to the health and welfare of the nursing student that adequate and proper housing facilities be provided.

The residence should be erected or remodeled for the purpose of providing adequate accommodations. Housing students in any part of the hospital clinical area is not approved by the Board.

The Board recommends the following criteria for student residences;

1. Rooms

Rooms should be at least $8\frac{1}{2}$ x 12 x 8 feet in size and whenever possible should be single occupant rooms.

Rooms occupied by two students should be large enough to assure the health and comfort of each occupant.

Students may not be housed in open dormitories, in open sleeping areas nor in double tiered bed arrangements.

Each room should be provided with individual furniture for each occupant, such as bed, bedding, desk, bureau or similar unit and a comfortable chair.

Each room should have adequate lighting and electrical outlets. Adequate closet space should be provided.

2. Corridors and Fire Exits

All residence corridors and fire exits should meet local building and fire codes to insure the utmost safety.

3. Bathing and Toilet Facilities

Toilet and bathing facilities may be provided as individual units for rooms, or as community facilities which provide adequate privacy for students.

Facilities should be provided in sufficient numbers for the students occupying the residence.

Lavatories - a ratio of one (1) unit to every ten (10) occupants.

Showers or tubs - a ratio of one (1) unit to every ten (10) occupants.

Toilets - a ratio of one (1) unit to every six (6) occupants.

IV. SCHOOL FACILITIES AND STUDENT SERVICES

D. Housing (con't)4. Recreation and Rest Facilities Should Include

Reception room	Kitchen or Refreshment area
Recreation room	Sewing-laundry room
Library or reading room	

Nurses assigned to night tours should be provided rooms in quiet areas. Nurses on day and night assignment should not be housed in the same room.

5. Dining Room Facilities

Dining Room facilities shall be well-lighted, ventilated, and comfortable furnished. The student should have an adequate, well-balanced diet. The accommodations should provide a comfortable and relaxing atmosphere.

E. Health Program

The student health program must be well planned and supervised for each student in the school of nursing.

The program should begin with a pre-entrance health survey as outlined in admission requirements, and continue throughout the entire nursing program.

Each student should have an opportunity to report to a daily health clinic. The clinic should be under the direction of a school physician and be supervised by the student health supervisor or health director.

The health program should include an annual physical examination, chest X-ray, laboratory tests as indicated and other procedures essential to the practice of good preventive health.

NURSING STUDENTS MUST BE PROVIDED OPPORTUNITY FOR EIGHT (8) HOURS OF CONTINUOUS REST DURING EACH TWENTY-FOUR HOUR PERIOD.

F. Student Organization

It is recommended that a student organization be encouraged having its own philosophy and objectives, constitution and by-laws and shall have regular meetings conducted according to parliamentary procedure.

Membership in SNAP should be encouraged.

Provision should be made for a recreation program.

G. Sick Leave

Sick leave (to twenty-one (21) days during the program) should be recorded on the permanent record card with the assigned clinical experience. Not more than one (1) week is allowed in a major area.

IV SCHOOL FACILITIES AND STUDENT SERVICE

G. Sick Leave (Con't)

Sick leave during affiliation experiences may be arranged on a proportionate basis as agreed upon by the contracting agencies. Sick leave equal to the number of days agreed upon by the agencies shall be recorded with the total experience days in the affiliation program. Sick days in excess of the number agreed upon must be made up in the clinical area.

H. Vacations and Holidays

Vacations of not less than eighty-four (84) days shall be granted each student during the three year period, preferably on the basis of twenty-eight (28) days annually, and planned to provide for the student's health and educational needs.

Holidays are to be no less than those granted other personnel in the controlling institution. When a holiday falls during an affiliation the contract should state this.

I. Interrupted Programs

The Director of Nursing or the Educational Director is responsible for notifying the Board, on the form provided, of the name of each student whose program has been interrupted for any reason. This information must be submitted as soon as possible after the program interruption.

The Director of Nursing or the Educational Director is responsible for notifying the Board office concerning the absence of any student for a period of three (3) months or more.

J. Transfer of Students

Schools of nursing desiring to admit students who have withdrawn from another nursing program must submit a proposed plan of program adjustment for review and approval by the Board. This regulation also applies to the reinstatement of students who have been absent for three (3) months or more for any reason.

Regardless of the amount of time spent in the previous program, the transfer student must spend a minimum of one (1) year in the school granting a diploma. No time credit may be allowed for courses or units of clinical experience that have not been completed, or which have been assigned failing grades. Programs must be submitted and approved prior to return to the school.

K. School Announcements

It is recommended that every approved school of nursing prepare a printed announcement or catalogue, and revise it frequently to provide the applicant with a preview of the program offered by the school. The latest revision of the school bulletin should be on file in the Board office.

V. COLLEGIATE SCHOOLS OF NURSING

A. Degree Programs

A program of nursing may be conducted in a junior or community college, a senior college or university. The organization and administration of a degree program in nursing should be in accordance with the general policies that govern other programs of comparable type and academic level in the degree-granting institution.

B. Philosophy and Purpose

The philosophy of the educational unit in nursing should be clearly defined and hold as an ultimate goal, the fullest possible development of the potentials of students for contributions as persons, nurses and citizens; the curriculum should reflect value judgment widely accepted in academic and professional circles.

C. Regulations

All regulations controlling the program of nursing in a hospital school of nursing apply with equal force to the program offered in the degree-granting institution.

The Board of Nursing Education and Licensure in Pennsylvania is a legal regulatory body which must employ certain quantitative as well as qualitative standards. The Board recognizes that there may be more than one way to achieve the legal requirements of producing a competent and safe practitioner and will approve the various approaches to the fulfillment of numerical standards after study and review of proposed equivalencies.

This freedom of choice is designed to encourage creative planning and to stimulate faculties in each collegiate program to develop their own distinctive patterns which achieve the declared objectives of the school and at the same time produce a competent practitioner of professional nursing eligible for licensure in other jurisdictions.

Current programs must be on file in the Board office. The Board requires that colleges and universities submit ten (10) detailed revisions in curriculum for impartial evaluation and approval before implementation in the school. Complete programs should be submitted every five years.

D. Application for Examination for Registration

Applicants for examination must complete the entire program in the college or university before the director of the program submits the application to the Board office. Candidates from collegiate schools approved by the National League for Nursing may submit the official transcript of the school attached to Page 3 of the application. The director of the school must complete the top of Page 2 and the bottom of Page 3. The transcript is in lieu of the practice days and theoretical instruction record.

Dates of practical experience in all co-operating agencies must be clearly shown on the bottom of Page 2.

V. COLLEGIATE SCHOOLS OF NURSING

E. Endorsement Licensure

Individual schools are responsible for the eligibility of their graduates for licensure in other jurisdictions, and therefore, should provide for the identification of integrated material and clear interpretation of variations in program upon request from other states. The content should be meaningful to the Board and to all other institutions of higher learning.

